Form 74-011-03-1 (Revised 11/2004)

MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF RECEIPTS

State Tax Commission P.O. Box 1140 Jackson, MS 39215

Read the filing information and instructions on the back of this form. (Complete a separate schedule for each Schedule Number and Product Type reported.)

Schedule Number:

DISTRIBUTOR INF	ORMATION		PI	LEASE PRINT IN INK OR	TYPE				
Name					Account Numb	er		Report N	lonth/Year
Product Code Inforn	nation: Check ap	oplicable	box.		: Enter applicable sch			Mode	Codes:
Automotive Gasoline: O65-Automotive Gasoline 124-Gasohol 125-Aviation Gasoline 123-Alcohol				Gallons Placed in Storage in Marine (Barge) Terminals and in Pipeline Terminals Callons Resolved from Terminal Refineries Callons Resolved from Terminal Refineries Callons Resolved from Terminal Refineries Callons Resolved from Symplices on Exchange				J - Truck B - Barge S - Ship R - Rail	PL - Pipeline
PRODUCT DISBUI	RSEMENT INF	ORMAT	ION						
1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4	5 nt of Destination (City/State or TCN)	6 Seller's Name	7 Seller's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Page of		•	ADDITION	AL LINES ON BACK	•	1	TOTAL (this page	ge only)	
i age 0i			ADDITION	AL LINES ON BACK	•		GRAND TOTA	L (all pages)	

MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF RECEIPTS

			_	···					
1 Carrier's	2 Carrier's	3 Mode	4 Poi	5 nt of	6 Purchaser's	7 Purchaser's	8 Date	9 Document	10 Net
Name	FEIN/SSN		Origin (TCN or City/State)	Destination (City/State or TCN)	Name	FEIN/SSN	Shipped	Number	Gallons
Page of _							TOTAL (this p	page only)	

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as receipts on your monthly Mississippi fuels tax return.

You may submit a schedule summarizing your receipts which must be formatted the same as the Distributor's Schedule of Receipts. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual receipts.

SCHEDULE NUMBER	Enter the schedule number for the product activity you are reporting.
NAME	Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
ACCOUNT NUMBER	Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
REPORT MONTH/YEAR	Enter the month and year for which you are reporting.
PRODUCT INFORMATION	Check the applicable box for the product type accounted for on this schedule.
CARRIER'S NAME	Enter the name of the company that transported the product.
CARRIER'S FEIN/SSN	Enter the FEIN or SSN of the company that transported the product.
MODE	Enter the mode of transport code used to move the product from the terminal or the product origin.
POINT OF ORIGIN	Enter the IRS Terminal Control Number if the product was disbursed from a terminal. Otherwise enter the city and state where the disbursement originated.
POINT OF DESTINATION	Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
PURCHASER'S NAME	Enter the name of the company that sold you the product.
PURCHASER'S FEIN/SSN	Enter the FEIN or SSN of the company that sold you the product.
DATE SHIPPED	Enter the date (month, day, year) the product was shipped.
DOCUMENT NUMBER	Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
NET GALLONS	Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
TOTAL (this page only)	Enter the sum of these columns for this page of the report.
GRAND TOTAL (all pages)	Enter the sum of these columns for all pages of this report.

Form 74-072-99-1 (Revised 11/2004)

MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

State Tax Commission P.O. Box 1140 Jackson, MS 39215

Read the filing information and instructions on the back of this form. (Complete a separate schedule for each Schedule Number and Product Type reported.)

DISTRIBUTOR INI	FORMATION		F	PLEASE PRINT IN INK O	R TYPE				
Name					Account Numb	er		Report N	/lonth/Year
Product Code Infor	mation: Check a	pplicable b	00X.		s: Enter applicable sch				Codes:
Automotiv ☐ 065-Automotive Gasoli ☐ 090-Additives ☐ 123-Alcohol	ve Gasoline: ne □ 124-Gasoh	nol [Aviation Gasoline: 125-Aviation Gasoline	 5B. Gallons Imported – Sold Tax Non-licensed Distributors, R Bulk End-Users 5D. Gallons Sold Destination St Collected to Licensed Distribution 	etailers, or 8 . Ga 13H . Ga ate Tax	llons Exported to Other Ilons Delivered to Arme Ilons Sold to Governme	ed Forces Tax Free	J - Truck B - Barge S - Ship R - Rail	PL - Pipeline
PRODUCT DISBU	RSEMENT INF	ORMATI	ON						
1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4 Po Origin (TCN or City/State)	oint of Destination (City/State or TCN)	6 Purchaser's Name	7 Purchaser's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
D			ADDITION				TOTAL (this pa	nge only)	
Page of _			ADDITION	NAL LINES ON BACK	`		GRAND TOTA	AL (all pages)	

MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

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1 Carrier's	2 Carrier's	3 Mode	4 Poi	5 nt of	6 Purchaser's	7 Purchaser's	8 Date	9 Document	10 Net
Name	FEIN/SSN	Wiode	Origin (TCN or City/State)	Destination (City/State or TCN)	Name	FEIN/SSN	Shipped	Number	Gallons
Page of _	Page of								

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as disbursements on your monthly Mississippi fuels tax return.

You may submit a schedule summarizing your disbursements which must be formatted the same as the Distributor's Schedule of Disbursements. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual disbursements.

SCHEDULE NUMBER	Enter the schedule number for the product activity you are reporting.
NAME	Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
ACCOUNT NUMBER	Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
REPORT MONTH/YEAR	Enter the month and year for which you are reporting.
PRODUCT INFORMATION	Check the applicable box for the product type accounted for on this schedule.
CARRIER'S NAME	Enter the name of the company that transported the product.
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POINT OF DESTINATION	Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
PURCHASER'S NAME	Enter the name of the company that bought the product.
PURCHASER'S FEIN/SSN	Enter the FEIN or SSN of the company that bought the product.
DATE SHIPPED	Enter the date (month, day, year) the product was shipped.
DOCUMENT NUMBER	Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
NET GALLONS	Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
TOTAL (this page only)	Enter the sum of these columns for this page of the report.
GRAND TOTAL (all pages)	Enter the sum of these columns for all pages of this report.

Form 74-071-99-1 (Revised 11/2004)

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF RECEIPTS

State Tax Commission P.O. Box 1140 Jackson, MS 39215

Read the filing information and instructions on the back of this form. (Complete a separate schedule for each Schedule Number and Product Type reported.)

Schedule Number:

DISTRIBUTOR INFO	ORMATION		PI	LEASE PRINT IN INK OR T	/PE				
Name					Account Nun	nber		Report N	lonth/Year
Product Code Inform	ation: Check ap	oplicable box		Schedule Numbers: E	nter applicable s	schedule number in	box above.	Mode	Codes:
Dyed Diesel & Kerosene: ☐ 072-Dyed Kerosene ☐ 142-Undyed Kerosene ☐ 228-Dyed Diesel Fuel ☐ 290-Dyed Biodiesel Fuel	Undyed Di ☐ 122-Blend S ☐ 160-Undyed ☐ 284- Undyed	tock Diesel Fuel	Fuel Oil: ☐ 153-Dyed Fuel Oil ☐ 154 Undyed Fuel Oil ☐ Jet Fuel: ☐ 130-Jet Fuel	Gallons Received Tax Paid A. Gallons Received from Terminal, Distributors Origin Tax Unpaid		C. Gallons Imported Ta X. Gallons Received fr Exchange Tax Unpa Unpaid	om Suppliers on	J - Truck B - Barge S - Ship R - Rail	PL - Pipeline
PRODUCT DISBUR	SEMENT INF	ORMATION	Ī						
1 Carrier's Name	2 Carrier's FEIN/SSN	Mode 3	4 Poi Origin (TCN or City/State)	nt of Destination (City/State or TCN)	6 Seller's Name	7 Seller's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Dogo of			ADDITION	AL LINES ON DACK			TOTAL (this pa	nge only)	
Page of			ADDITION	AL LINES ON BACK			GRAND TOTA	AL (all pages)	

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF RECEIPTS

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1 Carrier's	2 Carrier's	3 Mode	4 Poi	5 nt of	6 Purchaser's	7 Purchaser's	8 Date	9 Document	10 Net
Name	FEIN/SSN		Origin (TCN or City/State)	Destination (City/State or TCN)	Name	FEIN/SSN	Shipped	Number	Gallons
Page of _							TOTAL (this p	page only)	

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as receipts on your monthly Mississippi fuels tax return.

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SCHEDULE NUMBER	Enter the schedule number for the product activity you are reporting.
NAME	Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
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POINT OF DESTINATION	Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
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TOTAL (this page only)	Enter the sum of these columns for this page of the report.
GRAND TOTAL (all pages)	Enter the sum of these columns for all pages of this report.

Form 74-072-99-1 (Revised 11/2004)

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

State Tax Commission P.O. Box 1140 Jackson, MS 39215

Read the filing information and instructions on the back of this form.

Complete a separate schedule for each Schedule Number and Product Type reported.

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Sch	edu	ile l	Num	her:

(Complete a separate schedule for each Schedule Number and Product Type reported.) DISTRIBUTOR INFORMATION PLEASE PRINT IN INK OR TYPE Name Account Number Report Month/Year Product Code Information: Check applicable box. Schedule Numbers: Enter applicable schedule number in box above. **Mode Codes:** Dved Diesel & Kerosene: **Undved Diesel Fuel:** Fuel Oil: Gallons Imported - Sold Tax Collected to 6DB. Gallons Sold to Licensed Distributors Tax J - Truck PL - Pipeline Non-licensed Distributors, Retailers, or Bulk not Collected ☐ 153-Dyed Fuel Oil ☐ 072-Dyed Kerosene ☐ 122-Blend Stock B - Barge End-Users Gallons Exported to Other States ☐ 142-Undyed Kerosene ☐ 160-Undyed Diesel Fuel ☐ 154 Undyed Fuel Oil S - Ship Gallons Sold Destination State Tax Gallons Delivered to Armed Forces Tax R - Rail ☐ 228-Dyed Diesel Fuel ☐ 284- Undyed Biodiesel Fuel Jet Fuel: Collected to Licensed Distributors Gallons Dved Diesel Sold for Use on State & ☐ 290-Dyed Biodiesel Fuel ☐ 130-Jet Fuel 10A. Gallons Delivered to Tax Exempt Entities Local Gov't Contracts 10R. Gallons Delivered for Marine Use Gallons Dyed Diesel Imported for Use on 10Y. Gallons Delivered Tax Exempt to Railroad State & Local Gov't Contracts PRODUCT DISBURSEMENT INFORMATION 4 6 8 9 10 Carrier's Point of Purchaser's Carrier's Mode Purchaser's Date Document Net FFIN/SSN FEIN/SSN Shipped Number Name Origin Destination Name Gallons (TCN or City/State) (City/State or TCN) TOTAL (this page only) ADDITIONAL LINES ON BACK Page of GRAND TOTAL (all pages)

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

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Carrier's	Carrier's	Mode	Poi	nt of	Purchaser's	Purchaser's	Date	Document	Net
Name	FEIN/SSN		Origin	Destination	Name	FEIN/SSN	Shipped	Number	Gallons
			(TCN or City/State)	(City/State or TCN)					
Page of _					1	1	TOTAL (this p	page only)	
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